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## Search Results -

| Terms | Documents |
|---|---|
| l6 and (unresolv$3 or unsolv$6) | 3 |

**Database:**

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**Search:**

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L9
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| Refine Search |

| Recall Text | Clear |

## Search History

**DATE: Saturday, April 05, 2003**   Printable Copy   Create Case

| Set Name Query | Hit Count | Set Name |
|---|---|---|
| **side by side** | | **result set** |

*DB=USPT,PGPB,JPAB,EPAB,DWPI,TDBD; PLUR=YES; OP=ADJ*

| Set Name | Query | Hit Count | Set Name |
|---|---|---|---|
| L9 | l6 and (unresolv$3 or unsolv$6) | 3 | L9 |
| L8 | L7 and (facilitat$3 or permit$4) same (resolution or agreement or argree$6) | 7 | L8 |
| L7 | L6 and (identif$3 or verify$6 or notify$3 or notif$6) | 18 | L7 Considered all |
| L6 | l2 and (insurance or assurance) | 18 | L6 |
| L5 | identif$3 | 780851 | L5 |
| L4 | L2 and claim$3 same (insurance or assurance) same (fraud or fraudulent$2 or counterfeit$3) | 2 | L4 |
| L3 | L2 and claim$3 same (insurance or assurance) same (unresolv$3 or unsolv$6) | 0 | L3 |
| L2 | L1 and (facilitat$3 or allow$3 or participat$3) same (submit$6 or submission or send$3 or receiv46) same (complaint or complain$3 or disput$3) | 60 | L2 Considered all |
| L1 | (network$3 or database or internet or online or on-line or website or web-site or e-commerce) same (facilit$3 or store or department or customer or services or good$) same (transaction or auction$6 or bid$3) | 15127 | L1 |

END OF SEARCH HISTORY

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## Search Results -

| Terms | Documents |
|---|---|
| l2 and (insurance or assurance or premium) same claim$3 same (unresolv$6 or unsolv$6) | 1 |

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## Search History

**DATE:   Friday, April 04, 2003      Printable Copy      Create Case**

| Set Name | Query | Hit Count | Set Name |
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| side by side | | | result set |
| | *DB=USPT,PGPB,JPAB,EPAB,DWPI,TDBD; PLUR=YES; OP=ADJ* | | |
| L7 | l2 and (insurance or assurance or premium) same claim$3 same (unresolv$6 or unsolv$6) | 1 | L7 |
| L6 | L5 and (unresolv$6 or unsolv$6) | 0 | L6 |
| L5 | L4 | 6 | L5 |
| L4 | L2 and (complaint or complain$3 or disput$3) same (insurance or assurance or premium) same claim$6 | 6 | L4 |
| L3 | L2 and (complaint or complain$3 or disput$3) same (insurance or assurance or premium) same claim$3 same (unresolv$6 or unsolv$6) | 0 | L3 |
| L2 | (network$6 or database or internet or online or on-line)same(transact$3 or bid$6 or auction$6) | 27607 | L2 |
| L1 | (network$6 or database) same (transact$3 or bid$6 or auction$6) same (complaint or disput$3) same (insurance or assurance or premium) same claim$3 | 0 | L1 |

END OF SEARCH HISTORY

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DOCUMENT-IDENTIFIER: US 6336095 B1
TITLE: Method for electronic merchandise dispute resolution

Brief Summary Text (3):
With the advent of high-speed networks delivering entertainment and information on
demand, the current billing and payment systems will be flooded with transactions.
Consequently, the customer will be bombarded by invoices with numerous items for each
billing period. Moreover, the customer's lifestyle will be exposed to each system
operator due to the non-anonymous nature of the transactions.

Detailed Description Text (52):
FIG. 5 shows the general network architecture of the contemplated system for open
electronic commerce. Customer transaction device 188 can communicate with a merchant
through any gateway network 190 without revealing the owner. Thus, customers can travel
the networks anonymously, paying each in real-time for access. They can search out
merchants' electronic space and enter it anonymously, select the item for purchase, and
deliver payment in real-time. The system also provides for secure authorization-based
payment via credit or debit card. This is accomplished by the customer presenting
credit or debit card information stored within the trusted agent 120 as a credential.

Detailed Description Text (54):
Identification authority networks 202 may have authority servers 204 which manage a
database of credentials and an authority transaction device 206 which issues and
revalidates credentials. Examples of identification authorities connected to networks
202 are foreign offices, departments of motor vehicles, banks, and the Social Security
Administration. Identification authority networks 202 also have trusted servers 200 for
distributing security information.

Detailed Description Text (129):
Referring to FIGS. 15A and 15B, Purchase B checks if the merchandise will be embodied
as only a ticket (as opposed to a decryption ticket and electronic object) (steps
464-466). If only a ticket, then Ticket Holder B creates the ticket (step 468).
Purchase B then sends the ticket to trusted agent A (steps 470-472). Purchase A
receives the ticket and checks if it is correct by comparing the expected merchandise
identity (previously received from the BTA) with information in the ticket (steps
474-476). If not correct, then Purchase A identifies the transaction as a purchase and
hence aborts the transaction (steps 478-482). In the case where Purchase A does not
identify the transaction as a purchase (i.e., during a transaction involving a dispute
over electronic merchandise), the Pay Dispute protocol is initiated (step 484). If
trusted agent A approves the ticket as correct, it then sends information from the
ticket to a host transaction application for purchaser confirmation (steps 486-488).
Such information allows the CTD holder to verify that he is getting the merchandise and
price that he previously selected. If the ticket information is not correct, then the
transaction is aborted (steps 478-482). If the ticket is correct, then Purchase A sends
the ticket to Ticket Holder A for storage (steps 490-492). Trusted agent A now
provisionally holds the ticket 8. If trusted agent A subsequently aborts, then the
ticket 8 is deleted. If trusted agent A subsequently commits, then the owner/holder of
A will be able to present the ticket 8.

Detailed Description Text (168):
Referring back to FIGS. 12A and 12B, if instead of an anonymous money module payment,
the customer decides to pay via a credit or debit card credential, then the
Authorization-Based Payment/Refund subroutine is called (step 432). Referring to FIGS.
21A and 21B, Ticket Holder A retrieves a credit card or debit card credential (step
692). Purchase A sends a message indicating that payment is a "Credential Payment" and
containing the credential to Purchase B for validation (steps 694-700). If invalid, the

transaction is aborted (step 702). If valid, then Purchase B checks to see whether the customer is requesting a refund (steps 704-706). Assuming it is not a refund transaction, To Host B sends the price and credential to a card authorization network for payment authorization (step 708). The MTD initiates a card authorization process (step 710). Card authorization is well known in the art and typically involves the card issuer or its agent authorizing a particular payment when sufficient funds are present or the amount is within the card holder's credit limit. Upon completion of the card authorization process, Purchase B checks if a payment was authorized (steps 712-714).

Detailed Description Text (198):
If the customer is not satisfied with the result of the dispute interaction with the merchant, he can take his complaint to the Trusted Agency. The customer's transaction log shows that the dispute was denied by the merchant first. The dispute and accompanying documentation can be presented to a trusted server 200 on the Trusted Agency Network 208. The interaction is then similar to the interaction with the merchant's trusted agent 4. Most merchants will want to resolve the dispute directly with the customer, and not have the customer resort to the Trusted Agency resolution process. Too many disputes could jeopardize the merchant's status with the Trusted Agency.

Detailed Description Text (205):
If the merchant does not deny the dispute, then HTB sends a message to HTA querying the customer for resolution (step 1096). The customer then chooses if he wants a refund or new merchandise (assuming the merchant allows these options) (steps 1098-1100).

Detailed Description Text (252):
The security servers 1184 are initially certified by the primary security servers 1182 at manufacturing. Such primary security servers may be connected by a Security Server Manufacturing LAN 1204. Referring to FIG. 33B, the security servers 1184 receive various security information which they pass to the other modules. The security servers provide security services for the EMS Network 1198 and the bank LANs 1200, such as network sign-on where they pass updated security information. The security servers 1184 receive this information from the primary security servers 1182 over the Security Network 1196. Transaction money modules 1186 communicate with the EMS Network 1198 via network servers 1206 (NS). Participating banks have teller money module(s) 1188 and perhaps money generator(s) 1190 connected to their LANs 1200.

Detailed Description Text (257):
FIG. 35A shows the functional components of a security server 1184. An External Interface function 1208 provides a communications layer for network interfacing. A Session Manager function 1210 controls the security aspects of a transaction session. A Network Sign-On function 1212 manages the security functions for network sign-on. A Create Certificate function 1214 certifies a certificate for any of the money modules (in a primary security server, this function certifies security servers). A Create Account Profile function 1216 certifies and signs a bank account profile that allows a money module to access the subscriber's different bank accounts. A Distribute Certificatory Keys function 1218 distributes the Certification Agency's list of valid primary security server public keys to the money modules (primary security server also distributes global certification message). A Control Bad ID List function 1220 controls and distributes the list of bad identifiers. A Synchronize Date/Time function 1222 keeps money module Clock/Timer services synchronized to a system time. Clock/Timer 1224 and Cryptography functions 1226 are identical to those functions in the money modules.

Detailed Description Text (260):
An overview of the network sign-on procedure is provided with reference to FIG. 36. The Sign-On protocol describes the situation where a module 1243 desires access to the EMS Network 1198 for recertification, deposit, withdrawal or other reason. The module 1243 may be a transaction money module 1186, teller money module 1138, money generator module 1188, or customer service module 1192. (a) Establish a communication between module 1243 and network server 1206. (b) Pass the module's certificate to the network server 1206. (c) The network server 1206 generates a random verification number V and a random key K; the network server then passes the module's certificate, V, and K to a security server 1184 (encrypted by a NS/SS key). (d) The module 1243 and the security server 1184 establish a secure communication session (via session key (MM/SS)). (e) The security server 1184 passes the time/date, update bad ID list, update list of primary security server public keys, public key length, global recertification (if necessary), and recertified module certificate (if necessary). (f) End session with module 1243 and send V and K to the module 1243. (g) Encrypt V with K and send to the network server 1206. (h) The network server 1206 acknowledges network sign-on to the module 1243. (i)

The module 1243 then informs the network server 1206 of the destination (if any) to which it wishes to be connected. (j) The network server 1206 establishes a connection to the destination.

Detailed Description Text (322):
Referring to FIG. 44A, to link accounts, the owner of a transaction money module 1186 goes to his bank in person and connects his money module to the bank's network 1200. Referring to FIGS. 44A and 44B, the money module selects bank access to link accounts (step 1816). The money module 1186 then establishes a secure session with a security server 1184 (step 1818). The money module then sends a link accounts request to the security server along with its current bank profile (if one exists) (step 1820). The security server receives the link request (and bank profile) (step 1822). The security server establishes a session with a customer service module 1192 (step 1824). The security server then sends a link request (and bank profile) to the CSM (step 1826).

CLAIMS:

14. A method for processing a dispute over electronic merchandise comprising the steps of:

a first electronic transaction device sending electronic merchandise and dispute information to a second electronic transaction device;

said second electronic transaction device authenticating the validity of said electronic merchandise prior to merchant review of the dispute information;

determining not to deny said dispute; and

said second transaction device sending customer payment credential information to an authorization network for authorization of a refund amount.

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L8: Entry 6 of 7                          File: PGPB                          Mar 21, 2002

DOCUMENT-IDENTIFIER: US 20020035528 A1
TITLE: Online method and system for fulfilling needs resulting from property and other similar losses

Summary of Invention Paragraph (4):
[0002] Today, the process of insurance claim handling for consumers or insurance policy holders is scattered among some 2500 insurance companies, thousands of agents, adjusters, and appraisal firms, dozens of struggling call centers and countless other service providers. A great deal of the process is manual and paper-based, and almost none of it is centralized. Each company owns, operates and pays for its own processing system, each one trying to accomplish the same general goals, each system and process redundant of the competitors' systems. Such older paradigms can often benefit from newer technological advances coupled with innovative methods of doing business. The convergence of information technology, the internet and concomitant methods of doing business offer opportunities to create efficiencies by way of lower costs and greater satisfaction to consumers.

Summary of Invention Paragraph (5):
[0003] The widespread use of the Internet as it relates to the insurance industry is restructuring and combining traditional value chains, products and services into entirely new products and services which were not possible before. This dramatic restructuring of global business and industry is creating new value chains in what is now commonly called the Network Economy.

Summary of Invention Paragraph (6):
[0004] One value chain that is likely to be changed forever is the service of taking, recording and handling routine insurance claims. Current claim handling systems are inefficient when viewed in the context of the economy as a whole. For example, every insurance company has its own claims departments, processes and associated overheads. Insurance companies must pass on the costs associated with these departments, processes and overheads in the form of higher premiums to its customers. The paradigm of submitting a loss claim to an insurance company also removes the loss payee from the process of recovering from the loss in a substantive way. As such, the present processes do not provide the insurance consumer or loss payee certain choices that may otherwise be available to satisfy the requirement for being made whole with respect to a loss.

Summary of Invention Paragraph (7):
[0005] Although the current system of handling claims has been adjusted and fine tuned, it does not employ the powerful tools of Internet communications or network economics that the Internet makes possible. To reduce insurance claim's handling costs and to realize greater levels of efficiency and customer satisfaction, newer technologies must be employed. Tremendous opportunities for revenue are possible when Internet business methods are applied to the entire claim handling process, from the moment of first report, through the reinsurance indemnity process.

Summary of Invention Paragraph (8):
[0006] The use of the Internet opens up the possibility of centralizing claims processing for an entire industry. In this manner, the insurance industry can obtain the benefits that accrue from one resource rather than the multiple disparate discrete claims handling resources that currently exist.

Summary of Invention Paragraph (9):
[0007] Through centralizing the claim process and making it accessible to the insurance consumer, the traditional institutional approach to remediating a loss is placed into the hands of the person suffering the loss. This may create opportunities to aggregate

the kinds of services and products that a loss payee requires to satisfy the loss. As such, the centralized system can consider volume purchasing of services and products to satisfy the loss payee requirements. Such volume purchasing would lower the cost of goods and services that collectively the insurance industry pays today.

Summary of Invention Paragraph (10):
[0008] A centralized claim processing center that is accessible by customers, insurance companies and other institutions dealing with the claim loss process, would be beneficial in terms of standardizing a claim's fulfillment, offering choices among competing options for recovering from losses, reducing the overhead costs associated with settling claims, and creating ancillary benefits that only can be achieved from the process of centralization.

Summary of Invention Paragraph (13):
[0011] Accordingly, a system and method is needed that will enable all parties involved in a loss claim process including but not limited to customers, carriers, agents, brokers, claims service representatives (CSRs), suppliers, and attorneys to resolve needs stemming from loss claims at a central, branded, secure website serving claims for multiple participating insurers. Such a site would also permit the aggregation of products and services to fulfill the loss recovery activity. Additionally, such a site would permit the aggregation of subrogation claims that could thereafter be sold or auctioned in an exchange environment.

Summary of Invention Paragraph (15):
[0012] The present invention is drawn to a computer system and a method that takes insurance claim inputs from any number of sources, incorporates deep domain knowledge about claim processing, aggregates services and products related to loss recovery and employs Internet market-making tools to provide services to consumers, insurers and other related commercial interests.

Summary of Invention Paragraph (16):
[0013] More specifically, the invention opens an online claim reporting hub, where individuals and institutions are able to report details of personal and commercial insurance claims such as auto, homeowners and business claims against any insurer, at any time. The system accepts input from the Internet and responds to the user graphically, in sound, and in printable forms. The insurance institutional users of the system and method will direct respective policyholders and agents to the system providing 24 hour, 7 day per week, Internet claim service handling. The system preserves the user's privacy while online and at the same time, provides the marketing of products and services related to the user's needs as they typically relate to an insurance loss.

Summary of Invention Paragraph (17):
[0014] To preserve the generality of the claim it is anticipated that the any number of different persons may report a loss, such as an individual who experienced an insurance loss, an entity that anticipates claims against its policy or a witness to a loss. Examples of such reporters can include a consumer or policy holder, an insurance company, a potentially responsible party to a lawsuit, or someone who is reporting the event, but whose specific role has not yet been defined.

Summary of Invention Paragraph (19):
[0016] Claimants will essentially own the claims and drive the web-based insurance process of the invention. This process is an "open-system" which permits consumers to process their own claims and utilize the ancillary services and commodities offered. In its idealized form, the invention permits the claim process to proceed without an agent, broker or an insurance company.

Summary of Invention Paragraph (22):
[0019] In another embodiment, the system and method allows for demand aggregation of products and services specific to insurance loss fulfillment. Demand aggregation is relatively new, because until Internet capabilities, demand aggregation has not been practical. The method of the invention permits the purchase of large volume commodities and services, using purchasing power based upon the number of claimants needing a particular service or commodity.

Summary of Invention Paragraph (23):
[0020] In another aspect of the invention, in a business-to-business exchange, sellers, market makers and investors can transact for wholesale claims, post-accident purchase and sale of tranches of risk obligations and subrogation rights. The system and method

automatically scores a claim to determine the likelihood of recovery and then values the claim. The subrogation opportunity is valued by reviewing criteria such as accident description, loss state, responsible party, and other pertinent demographics. Once the system and method assigns a subrogation score and a valuation, the claim is bundled or pooled with other claims that have some commonality to the newest claim. Thereafter, the bundled set or portfolio is valued as to its sale price. As the central market for wholesale claim service and financial liquidity, the invention will utilize network economics to further slash claim handling costs to its participating insurance companies, while building an electronic database about claims handling.

Summary of Invention Paragraph (25):
[0022] The invention allows selected users to a search a database for similar claims in order to identify potential or possible claims which may develop as class action suits or mass tort claims. Such a search may be done without revealing the identities of the individual claimants. Additionally, the invention permits the pooling of common issues into anonymous class action groups.

Summary of Invention Paragraph (26):
[0023] The invention allows selected users to a search a database and essentially mines data that is collected during the claims process. Among other things, data mining is valuable because it allows for the sale of non-personal data to interested parties. For example, data could be used for rate making or underwriting scoring and as such, would be useful to state agencies as well as insurance companies.

Brief Description of Drawings Paragraph (6):
[0031] FIG. 4 is a block diagram, which illustrates how subrogation opportunities are identified according to the invention;

Detail Description Paragraph (2):
[0034] The present invention is a system and method for enabling a person or entity with a need resulting from a loss relating to property, automobiles, boats, etc. to have the need fulfilled or satisfied on a site of a global computer network such as the well known Internet. For example, a policyholder who sustains a loss would have a need to report an insurance claim for the loss and have the claim settled. The policyholder may also require access to various related services, which help the policyholder with other issues, related to the loss.

Detail Description Paragraph (3):
[0035] In a typical embodiment of the invention, a web site is provided on the World Wide Web where such needs can be fulfilled. The web site permits any person or entity having a need resulting from a property loss to fulfill the need online. Such persons or entities can include policyholders, insurance carriers, insurance agents, insurance brokers, insurance customer service representatives, entities anticipating claims against its insurance policy, suppliers, attorneys, police officers, witnesses to the event or accident that caused the loss, and other persons or entities with a need that results from the loss. One particularly useful aspect of the invention is that it eliminates the need for claimants to go through an agent, broker or the insurance company to file a loss claim.

Detail Description Paragraph (6):
[0038] The vendor referral service is typically offered during the claim reporting process as described below, and provides appropriate vendor services that enable a claimant to resolve various issues associated with the claim event. Available vendors are typically pre-approved by the associated insurance carrier, and include repair and replacement services. Vendor referrals are preferably aggregated in the invention to lower the price of the services.

Detail Description Paragraph (10):
[0042] The self-guided user help service provides an interactive, real-time discussion feature and access to a "natural language" smart search engine, which enables claimants to ask questions that were not addressed in the FAQs. Further, the user help service can perform an assessment of the claimant's current insurance policy and lifestyle in order to best fit their changing needs. This may also include real-time discussion with agents to answer claims questions and referrals to other counseling services.

Detail Description Paragraph (11):
[0043] The web site further operates as a multi-party portal or "business to business" exchange where vendors of goods and services, client insurers, reinsurers and investors and other interested parties transact for wholesale claim services and post-accident

purchase and sale of risk obligations and subrogation rights. The web site provides a central market for wholesale claim service and financial liquidity, utilizing network economics to slash claim handling costs to participating insurance companies. The web site also builds an electronic database about claims handling.

Detail Description Paragraph (12):
[0044] As illustrated in FIG. 1, typical actions which can be facilitated online at the web site include but are not limited to policyholder-to-carrier transactions; carrier-to-carrier transactions; exchange of rights and responsibilities; and integration of tools and information. Online policyholder-to-carrier transactions can include submitting a loss claim, opening a claim file, notifying various entities such as the insurance carrier, police, medical authorities, workers' compensation authorities and essentially anyone having salience in the claim reporting scheme. Thereafter the claimant may inspect its file, correspond with various resources that have some bearing on processing the claim. Online carrier-to-carrier transactions can include for example claim notification and documentation, negotiation, and financial settlement. Online exchange of rights and responsibilities can include for example outsourcing claim handling and selling claim rights and risks. Online integration of tools and information services can include for example police reports, public records, skip traces, and the like, and online dispute resolution.

Detail Description Paragraph (13):
[0045] Referring now to FIG. 2, a block diagram is presented of an exemplary embodiment of a system 10 from which a web site according to the invention is built. The system 10 typically comprises a web application server 12 which is communicable via the Internet 14 or any other global computer network with microprocessor based devices 16 typically used by claimants (insurance carriers, insurance regulators, insurance agents, self insureds, consumers), that include Internet browser software. Such microprocessor based devices can include home personal computers, vehicle on-board tracking systems, voice data input/response systems, public access kiosks, or hand-held computers to name a few. The application server 12 typically includes well known hardware and software components which operate to define three back-end layers: a web server layer 18, an application server layer 20, and a data layer 22. Each layer is protected by a firewall 24, 26, 28 that prevents unauthorized access by Internet users. A secure sockets layer 30 (SSL) is provided between the Internet 14 and the web server layer 18 to provide privacy, authentication, and message integrity. The web server layer 18 includes a local director 32 that routes signals to a pair of web servers 34, and a directory server 36. These servers 34, 36 are the communication links between the application server layer 20 and the internet 14. The application server layer 20 includes an application server 38 which handles all data manipulation and tagged pages such as programmed in XML or HTML page-creation functions and a content management server 40. The data layer 22 includes a first database 42 for storing claims data and a second database 44 for storing subrogation data. The web application server 12 advantageously allows the deployment of applications in a scalable fashion to accommodate increasing user demands over time and permits interfacing with existing business systems. The web application server 12 is also designed to be communicable with midsize and smaller claimants 46 via a public key infrastructure 48 (PKI). Large corporate claimants 50 on corporate intranets 52 can communicate with the web application server 12 via an extranet 54.

Detail Description Paragraph (14):
[0046] FIG. 3 is a block diagram that illustrates how needs arising from loss claims are processed on the web site in accordance with an embodiment of the method of the invention. In box 60, a person or entity that has a need resulting from an accident or event, which causes a loss, accesses 62 the web site. Such persons or entities can be policyholders and agents directed to the site by insurance companies who subscribe to the site. In some embodiments of the invention, incentives can be employed which encourage the use of the web site for reporting claims online. Incentives can take the form of a gift menu that empowers web site users to choose a gift or a gift certificate at participating online vendors, or cash-back based on their needs.

Detail Description Paragraph (17):
[0049] The data provided by the claimant is then analyzed and processed in box 66. This involves identifying the claimant; verifying insurance coverage; summarizing the information or data obtained from the claimant; identifying subrogation opportunities, fraud, and claims that require an escalation of services; matching the claimant with the appropriate services in order to fulfill the claimant's needs; aggregating demands; and data storing.

Detail Description Paragraph (18):
[0050] The claimant identification process permits the determination of what the
claimant's needs are so that appropriate steps can be automatically taken to resolve
the claimant's needs as these steps are affected by carrier preferences, jurisdiction
requirements, and availability of solutions. During the identification process, the
information provided by the claimant is analyzed in order to identify the claimant as a
policyholder, a witness, insurance company, or other person or entity with a need
resulting from the loss.

Detail Description Paragraph (19):
[0051] The insurance coverage verification process determines what solutions are
available to the claimant. The information/data summarizing process provides the
claimant with a confirmation email that can be printed out locally for the claimant's
records. The email also summarizes policy claim information and the next steps in the
process. A file is also created for the claimant which can be easily accessed by the
claimant at the web site at a later date via the claim tracking function. This file
enables the claimant to inquire as to the status of the claim to view how the claim is
progressing.

Detail Description Paragraph (20):
[0052] The processes for identifying subrogation opportunities, fraud, and claims that
require service escalation; claimant matching; and demand aggregating are performed by
an automated rules engine. An example of such a rules engine is described in U.S. Pat.
No. 5,991,733 issued to Aleia, et al. on Nov. 23, 1999 for a "Method and computerized
system for managing insurance receivable accounts." The disclosure of U.S. Pat. No.
5,991,733 as it relates to the rules engine is incorporated herein by reference. The
computerized system described in U.S. Pat. No. 5,991,733 provides, among other
capabilities, for cases processed in-house by collectors, automation respecting
scripted dispute handling, on-line payment plan capabilities, electronic data transfer
and, collection strategy development, for cases referred to an outside collection
agency or attorney, automation respecting facsimile generations, legal strategy
development, in-house attorney reviews and monitoring, electronic data transfers to
local counsel, evaluation of the next step to be undertaken and, access to a bankruptcy
database.

Detail Description Paragraph (21):
[0053] As illustrated in FIG. 4, subrogation opportunities are identified using the
claim data 70 obtained at the web site 72 during the interview or interrogation process
74. The claim data is analyzed 76 for state, type of claim, accident description, loss
date, claim notes, presence of a favorable police report, existence of an insurance
carrier, and other similar criteria. As subrogation opportunities are identified, the
claimant's file is passed to the subrogation process 78 for servicing as will be
explained further on. If no subrogation opportunity is found, the file is closed 79.

Detail Description Paragraph (23):
[0055] Claimant matching is accomplished by presenting the claimant with service
selections which are based on the type of claimant the person or entity was identified
as by the system in the claimant interviewing process, and providing service selections
which are customized for the claimant. Claimant matching optimizes the claimant's
experience in the claim process and continues until the claimant is satisfied. In one
embodiment of the method, the service selections can include preferred vendor services
discounts where claimants will have access to discounts at featured vendors. If the
nature of the reported claim, the location of the event, and the claimant's insurance
carrier dictates the use of one of these vendors, a hot button to the vendor's web site
will be displayed at the site. If the claimant selects one of these vendors, the
selected vendor is contacted in real-time in order to expedite resolution of the claim
event. In another embodiment of the method, the service selections can include online
claims settlement options. Claimants are provided with options for accepting and
settling the loss reimbursement of the claim online. The settlement is subject to the
automatic appraisal of the claim, acceptance of a predetermined settlement amount, and
access to external settlement engines such as online alternative dispute resolution
services.

Detail Description Paragraph (25):
[0057] The data, which has been analyzed and processed, is stored in the data layer of
the system or data warehouse. The data warehouse is advantageously used for reporting,
resale claim aggregating and matching claimants with the appropriate services. The data
warehouse typically stores data about prior selections made by claimants; stores data
provided during the claimant interview process; and stores predetermined selections and

preferences of insurance carriers.

Detail Description Paragraph (28):
[0060] If the person or entity in the reporting step of box 64 wishes to engage in some form of claim data exchange, the site will automatically provide access to this service online. Claim data exchanges can take the form of transacting for wholesale claim services, or post-accident purchase and sale of tranches or portfolios having risk obligations and subrogation rights. Exchanging subrogation claims facilitates bulk transactions between insurance carriers, subrogation service providers, and the investment community. The ultimate goal of the method and system of the invention is to provide a maximum return to all parties involved in the transaction. The claims exchange process of the invention achieves this goal by enabling participants to buy, sell and service claims for all lines of business. The claims exchange feature of the invention permits matching of purchasers with portfolios that meet predetermined requirements, i.e., accounts may be placed, bought, sold, evaluated, serviced, submitted to arbitration, and settled online via the claims exchange process.

Detail Description Paragraph (29):
[0061] FIG. 6 illustrates how the invention compiles, values and sells subrogation rights. The claims files 90 stored in the data warehouse mentioned earlier are searched to identify 91 claims with subrogation rights. A claim with subrogation rights is scored 92 as to the probability of its recovery, and the cost of recovering the claim is estimated 93. The recovery score and the estimated cost of recovery are used to set a value 94 for the claim. Once the claim is valued, it is bundled or pooled 95 into a group with other claims that have some commonality to the claim. In particular, the claims are grouped according to pre-established criteria, examples of which include but are not limited to dollar value, type of claims (automobile, homeowners) state or region. The bundled group or portfolio of claims is then valued 96 as to its sale price and offered for sale 97 in an auction-like manner. The bid, ask and sale prices are then recorded 98 in the data warehouse.

Detail Description Paragraph (30):
[0062] As should now be apparent to those skilled in the art, the Internet web site-based claim-reporting feature of the invention operates as a central point for the collection of claim event information. The invention will simplify the claims management process and reduce the trouble, time, and expense that claimants and carriers typically incur in order to complete the claim reporting and loss reimbursement process. The claims reporting web site of the invention offers significant sources of value for the insurance carriers, policyholders, and agents. Insurance carriers that subscribe to the service can reduce expenses and improve their customer service. Policyholders are empowered with convenient access to report a claim, step-by-step guidance on the claim reporting process, and control over the decisions that can help to resolve their claim event.

Detail Description Paragraph (31):
[0063] Subscribed carriers can offer value-added services to their policyholders at typically half the present market cost of reporting a claim. Once a critical mass of claim reporting and vendor selection data is collected at the web site, subscribed carriers have access to purchase valuable database of information for benchmarking purposes. This information can be offered at about half the cost of what leading insurance carriers currently pay for this information.

CLAIMS:

3. A computer system for fulfilling needs resulting from claims for losses to person or property, the system comprising: a site generating component for generating a site on a global computer network for inputting insurance claims from a plurality of sources; a claim data analyzing component for analyzing the inputted insurance claim using deep domain knowledge about claim processing; a claim rehabilitation component that aggregates services and products related to loss recovery and uses network market-making tools to provide services to consumers and commercial interests which go toward rehabilitating insurance claims.

5. The computer system according to claim 4, wherein the site is operative as an online claim reporting hub that permits the plurality of sources to report details of personal and commercial insurance claims against any insurer at any time.

7. The computer system according to claim 5, wherein the personal and commercial insurance claims are selected from the group consisting of automobile claims,

homeowners claims and business claims.

11. The computer system according to claim 3, wherein the plurality of sources is selected from the group consisting of individuals who experienced an insurance loss, entities that anticipate claims against its policies, and witnesses to losses.

12. The computer system according to claim 11, wherein the plurality of sources is selected from the group consisting of consumers, policy holders, insurance companies, potentially responsible parties to a lawsuit, and persons reporting claim events whose specific roles have not yet been defined.

14. The computer system according to claim 3, wherein the system is adapted to permit claim processing without an agent, broker or an insurance company.

22. The computer system according to claim 3, further comprising a database which permits selected users to search for similar claims, thereby enabling the selected users to identify potential claims which are likely to develop as class action suits or mass tort claims.

25. A method for fulfilling needs resulting from claims for losses to person or property, the method comprising the steps of: generating a site on a global computer network for inputting insurance claims from a plurality of sources; analyzing the inputted insurance claim using deep domain knowledge about claim processing; aggregating services and products related to loss recovery using network market-making tools to provide services to consumers and commercial interests which go toward rehabilitating insurance claims.

27. The method according to claim 26, wherein the site is operative as an online claim reporting hub that permits the plurality of sources to report details of personal and commercial insurance claims against any insurer at any time.

29. The method according to claim 27, wherein the personal and commercial insurance claims are selected from the group consisting of automobile claims, homeowners claims and business claims.

33. The method according to claim 25, wherein the plurality of sources is selected from the group consisting of individuals who experienced an insurance loss, entities that anticipate claims against its policies, and witnesses to losses.

34. The method according to claim 33, wherein the plurality of sources is selected from the group consisting of consumers, policy holders, insurance companies, potentially responsible parties to a lawsuit, and persons reporting claim events whose specific roles have not yet been defined.

42. The method according to claim 41, further comprising the steps of providing a database and permitting selected users to search for similar claims, thereby enabling the selected users to identify potential claims which are likely to develop as class action suits or mass tort claims.